ATTACHMENT 3 Billing recipients for noncovered services

As stated in HFS 101.03(103), Wis. Admin. Code, a noncovered service is a service, item, or supply for which Medicaid reimbursement is not available. This includes the following:

- A service listed as noncovered in HFS 107, Wis. Admin. Code.
- A service for which prior authorization has been denied.
- A service considered by consultants to the Department of Health and Family Services to be medically unnecessary, unreasonable, or inappropriate.

In some cases, a recipient may request a noncovered service. No part of the charge for a noncovered service is reimbursable by Wisconsin Medicaid and the provider may instead bill the recipient. However, dentists may bill the recipients for a noncovered service only if certain conditions are met prior to the delivery of that service:

- Wisconsin Medicaid requires the dentist to explain to the recipient prior to providing the service that the service is not covered by Wisconsin Medicaid and that the recipient is responsible for payment.
- The noncovered service must be separate or distinct from a related, covered service.
- If the recipient still requests the service after being told that it is not Medicaid-covered, the recipient and the dentist need
 to decide whether the service should be provided and make payment arrangements. Before providing the service,
 dentists are encouraged to obtain a written statement from the recipient verifying that the recipient has accepted liability
 for the service.

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